

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Todd Delain

Street Address

3838 Conard Road

City, State and Zip Code

New Franken, WI 54229



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing _____
 ☒ Pre-Primary 2018
☐ Spring
 ☒ Fall
 ☐ Special
 ☐ Termination Report also complete Schedule 4

☐ July Continuing _____
 ☐ Pre-Election _____

☐ September Continuing _____

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B Calendar Year-To-Date |
|---|-------------------------|--------------------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ <u>4918.98</u> | \$ <u>8126.62</u> |
| 1B. Contributions from Committees (Transfers-In) | \$ <u>225.00</u> | \$ <u>225.00</u> |
| 1C. Other Income and Commercial Loans | \$ <u>0</u> | \$ <u>0</u> |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ <u>5143.98</u> | \$ <u>8351.62</u> |

2. DISBURSEMENTS

| | | |
|--|-------------------|-------------------|
| 2A. Gross Expenditures | \$ <u>2104.70</u> | \$ <u>3390.36</u> |
| 2B. Contributions to Committees (Transfers-Out) | \$ <u>0</u> | \$ <u>0</u> |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ <u>2104.70</u> | \$ <u>3390.36</u> |

CASH SUMMARY

| | |
|---|-------------------|
| Cash Balance Beginning of Report | \$ <u>1921.98</u> |
| Total Receipts | \$ <u>5143.98</u> |
| Subtotal | \$ <u>7065.96</u> |
| Total Disbursements | \$ <u>2104.70</u> |
| CASH BALANCE END OF REPORT | \$ <u>4961.26</u> |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ <u>0</u> |
| LOANS (Balance at the Close of This Period-3B) | \$ <u>575.66</u> |

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

| | | |
|---|--|------------------------------------|
| Type or Print Name of Candidate or Treasurer <u>Sue Porath</u> | Signature of Candidate or Treasurer <u>Sue Porath</u> | Date: <u>8-5-2018</u> |
| | Email: <u>slp512@hotmail.com</u> | Daytime Phone: <u>920-562-7387</u> |

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

ETHCF-2L (Rev. 01/16) The Wisconsin Ethics Commission prescribes this form. Completed forms must be filed with your local clerk.

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page 1 of 7

Complete Committee Name

Friends of Todd Delain

* Pre-Primary Campaign Finance Report

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|---|--|---------------------------|----------------------|
| 7/5 | Lori Delain E 3198 Rockledge Road Casco, WI 54205 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$100 | \$100 |
| 7/5 | Shannon Mueller N. 4456 Jahnke Road Luxemburg, WI 54217 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$20 | \$20 |
| 7/6 | Todd Delain 3838 Conard Road New Franken, WI 54229 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Chief Deputy - (Candidate) | \$18. ⁹⁸ | \$575. ⁶⁶ |
| 7/11 | David Seidl 2878 Crab Apple Ln Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Business Owner/ Cattle Salesman | \$200. ⁰⁰ | \$200. ⁰⁰ |
| 7/16 | David Charles Sr. 5845 Shore Acres Rd New Franken, WI 54229 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | President, Cash Depot | \$500 | \$500 |
| 7/9 | Jeffrey Mekash 2942 Marble Mountain Way Green Bay, WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$30 | \$30 |
| 7/20 | Howard Frankenthal 9160 N. Upper River Rd River Hills, WI 53217 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Business Owner/ Sales | \$100 | \$100 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 968.⁹⁸ 1525.⁶⁶

TOTAL ITEMIZED CONTRIBUTIONS

\$ — —

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ — —

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ — —

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page 2 of 7

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|---|--|---------------------------|----------------|
| 7/26 | Jennifer Sandberg 2646 Wildflower Row Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$50 | \$50 |
| 7/26 | Cheryl Berken 517 12TH Ave Green Bay, WI 54303 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$100 | \$100 |
| 7/26 | Lark Wartenberg 2478 Sunrise Ct. Green Bay, WI 54302 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$50 | \$50 |
| 7/26 | Lori Kinnard 3438 Church Rd Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$100 | \$100 |
| 7/26 | William Roach 3260 Hickory Ridge Ln Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$100 | \$100 |
| 7/26 | Wayne Resch 3888 Concord Rd New Franken, WI 54229 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$100 | \$100 |
| 7/26 | Moiria Callan 3173 Nicolet Drive Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$50 | \$50 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 550.⁰⁰ 550.⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ — —

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ — —

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ — —

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|---|--|---------------------------|----------------|
| 7/26 | Judy Krawczyk 2495 Manitowoc Rd Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$50 | \$50 |
| 7/26 | Dan Kiley 3283 Davies Ave Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Salesman | \$250 | \$250 |
| 7/26 | Pete Bilski 1915 Treeland Drive Green Bay, WI 54304 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Business Consultant | \$200 | \$200 |
| 7/26 | Karl Lay 1400 Jossart Rd Luxemburg, WI 54217 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$50 | \$50 |
| 7/26 | Amy Pautzke 2534 Sussex Rd Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$50 | \$50 |
| 7/26 | Randy Christopherson 2098 Descendant Ln Suamico, WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$25 | \$25 |
| 7/26 | David Potrat 3245 Libal Street Green Bay WI 54301 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Sheriff's Deputy Captain | \$200 | \$200 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

 \$ 825.⁰⁰

 825.⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ —

—

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ —

—

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ —

—

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page 4 of 7

Complete Committee Name

Friends of Todd Delany

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|--|--|---------------------------|----------------|
| 7/26 | Patty Rousseau 2818 Berken Ct Green Bay WI 54304 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 75 | \$ 75 |
| 7/26 | John Macco 1874 Old Valley Rd De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Wayne Gossage 607 Ridgerview Ct Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Trisha Brodbeck 2849 Hawks Nest Trail Green Bay, WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | James Morrison 440 Woodfield Dr Green Bay WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Matthew Ronk 3512 Glen Abbey Dr Green Bay WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | Arnold Nommensen 1182 Highview Ln Green Bay, WI 54304 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 25 | \$ 25 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 450.⁰⁰

450.⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ —

—

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ —

—

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ —

—

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|--|--|---------------------------|----------------|
| 7/26 | Darlene Marcelle 1832 Fresta Ln Green Bay WI 54302 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Catherine Lavolette 337 Ridgeview Ter Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Sue Porath 4835 Placid Way New Franken, WI 54229 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Financial Planner | \$ 500 | \$ 500 |
| 7/26 | Timothy Maloney 2038 Tunis Rd Green Bay WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | Sandra Juno 616 Dauphin St Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Bonnie Platten 1555 Arapahoe Trail Green Bay, WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | Retired Business Owner | \$ 300 | \$ 300 |
| 7/26 | Brad Muller 3142 Essen Rd Bellevee, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

 \$ 1150.⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ —

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ —

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ —

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page 6 of 7

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|---|--|---------------------------|----------------|
| 7/26 | Rich Heidel 667 Hickory Way Hobart, WI 54155 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 70 | \$ 70 |
| 7/26 | Dan Lemkuil 102 N. Broadway #305 De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | John Bain 2272 Gringotts Way De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Marc Shreld 2348 Oak Ridge Cir De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 60 | \$ 60 |
| 7/26 | Dan Van Lanen 3231 Evergreen Ave Green Bay WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Ben Boncher 663 St. Joseph St De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 20 | \$ 20 |
| 7/26 | Karen Sandberg 2619 Vicki Lane Green Bay WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 25 | \$ 25 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 375.⁰⁰ 375.⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ - -

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ - -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ - -

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page 7 of 7

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|------|---|--|---------------------------|----------------|
| 7/26 | Bill Symes 1721 School Lane Suamico, WI 54173 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | David Lasee 1813 Sunkist Circle De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Jeron Jaconi 852 Severndroog Way Green Bay, WI 54313 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 50 | \$ 50 |
| 7/26 | Cynthia Treleven 639 Hickory Drive Hobart, WI 54155 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | Philip Resch 1605 Granada Ct. De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | Christopher Boland 2525 County Highway 22 De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |
| 7/26 | Peter Delain 616 Aurora Drive Green Bay, WI 54302 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# | | \$ 100 | \$ 100 |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 600.⁰⁰ 600.⁰⁰

TOTAL ITEMIZED CONTRIBUTIONS

\$ 4918.⁹⁸ 5475.⁶⁶

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 4918.⁹⁸ 5475.⁶⁶

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Page 1 of 1

Complete Committee Name

Friends of Todd Delain
** Pre-Primary Campaign Finance Report*

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name of Committee, Mailing Address and Zip Code | Amount of Contribution |
|---|--|------------------------|
| 7/6 | Friends of Barbara Dorff 3375 Pebble Beach Ct. Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | \$100 |
| 7/26 | Friends of John Gossage 2430 East Ridge Ter. Green Bay, WI 54311 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | \$125 |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | |
| SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE | | \$ 225. ⁰⁰ |
| TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES | | \$ 225. ⁰⁰ |

SCHEDULE 1-C**RECEIPTS**
Other Income and Commercial LoansPage 1 of 1

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
|------|--|----------------|--------|
| | | | 0 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

SUBTOTAL OTHER INCOME THIS PAGE

\$ 0

TOTAL ITEMIZED OTHER INCOME

\$ 0

TOTAL OTHER INCOME

\$ 0

SCHEDULE 2-A
DISBURSEMENTS
 Gross Expenditures

 Page 1 of 2

Complete Committee Name

Friends of Todd Delain

* Pre-Primary Campaign Finance Report

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount |
|------|---|--|------------|
| 7/5 | Square 1455 Market St. Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Lori Delain) | \$ 3.65 |
| 7/5 | Square 1455 Market St., Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Shannon Mueller) | \$.85 |
| 7/6 | Office Depot / Office Max 2350 E. Mason Street Green Bay, WI 54302 Check if: <input type="checkbox"/> In-Kind Offset | Copy Paper | \$ 18.98 |
| 7/6 | Pay Pal 2211 North First Street San Jose, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Friends of Barbara Dorff) | \$ 3.20 |
| 7/13 | CLS Services Inc. 1172 South Park Drive Appleton, WI 54914 Check if: <input type="checkbox"/> In-Kind Offset | Yard Signs | \$ 1480.50 |
| 7/13 | Silly Toast Designs 583 N. Perkins Street Appleton, WI 54914 Check if: <input type="checkbox"/> In-Kind Offset | Artwork Fee | \$ 47.25 |
| 7/9 | Pay Pal 2211 North First Street San Jose, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Jeffrey Melkash) | \$ 1.17 |
| 7/20 | Pay Pal 2211 North First Street San Jose, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Howard Frankenthal) | \$ 3.20 |

| | |
|--|------------|
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | \$ 1558.80 |
| TOTAL ITEMIZED EXPENDITURES | \$ — |
| TOTAL UNITEMIZED EXPENDITURES | \$ — |
| TOTAL EXPENDITURES | \$ — |

SCHEDULE 2-A
DISBURSEMENTS
 Gross Expenditures

 Page 2 of 2

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount |
|------|---|---|--|
| 7/26 | Square 1455 Market Place Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for David Lasee) | \$ 1. ⁹⁰ / ₁₀₀ |
| 7/26 | Square 1455 Market Place Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Jevon Jacori) | \$ 1. ⁹⁰ / ₁₀₀ |
| 7/26 | Square 1455 Market Place Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Cynthia Treleven) | \$ 3. ⁶⁵ / ₁₀₀ |
| 7/26 | Square 1455 Market Place Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Philip Resch) | \$ 3. ⁶⁵ / ₁₀₀ |
| 7/26 | Square 1455 Market Place Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Christopher Boland) | \$ 3. ⁶⁵ / ₁₀₀ |
| 7/26 | Square 1455 Market Place Suite 600 San Francisco, CA 94103 Check if: <input type="checkbox"/> In-Kind Offset | User Fee / Expense (for Peter Delain) | \$ 3. ⁶⁵ / ₁₀₀ |
| 7/30 | Rock Garden 1951 Bond Street Green Bay, WI 54303 Check if: <input type="checkbox"/> In-Kind Offset | Room Rental and appetizers for 7-26-18 fundraiser / event | \$ 527. ⁵⁰ / ₁₀₀ |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |

| | |
|--|---|
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | \$ 545. ⁹⁰ / ₁₀₀ |
| TOTAL ITEMIZED EXPENDITURES | \$ 2104. ⁷⁰ / ₁₀₀ |
| TOTAL UNITEMIZED EXPENDITURES | \$ 0 |
| TOTAL EXPENDITURES | \$ 2104. ⁷⁰ / ₁₀₀ |

SCHEDULE 2-B

DISBURSEMENTS **Contributions To Committees** **(Transfers-Out)**

Page 1 of 1

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code | Amount | Y-T-D Total |
|--|---|--------|-------------|
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | 0 | 0 |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| | <p>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</p> | | |
| <p>SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE</p> | | \$ 0 | 0 |
| <p>TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES</p> | | \$ 0 | 0 |

SCHEDULE 3-A

Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE

Page 1 of 1

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| | | Outstanding Balance Beginning This Period | New Obligations or Additions This Period | Cumulative Payments This Period | Outstanding Balance At Close of This Period |
|-------------|---|---|--|------------------------------------|---|
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Creditor | | | | |
| | Nature of Debt (Purpose) | | | | |
| | | SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE | | | |
| | | \$ 0 | | | |
| | | TOTAL ITEMIZED OBLIGATIONS | | | |
| | | \$ 0 | | | |
| | | TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS | | | |
| | | \$ 0 | | | |
| | | TOTAL INCURRED OBLIGATIONS | | | |
| | | \$ 0 | | | |

SCHEDULE 3-B

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Page 1 of 1

Complete Committee Name

Friends of Todd Delain

Instructions for completing schedules are on the back of each schedule.

| | | | | | |
|-----------------------|---|--|-----------------------|---------------------------------|--|
| Date <u>7/6/18</u> | Full Name, Mailing Address and Zip Code of Loan Source <u>Todd Delain</u> <u>3838 Conard Road</u> <u>New Franken, WI 54229</u> | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| | | <u>\$ 556.⁶⁸</u> | <u>\$ 18.98</u> | <u>0</u> | <u>\$ 575.⁶⁶</u> |

List All Endorsers or Guarantors (if any)

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | <u>Chief Deputy - Candidate</u> |
| | Amount Guaranteed Outstanding \$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | |
| | Amount Guaranteed Outstanding \$ |

| | | | | | |
|--------------------|--|--|-----------------------|---------------------------------|--|
| Date <u>/ /</u> | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| | | | | | |

List All Endorsers or Guarantors (if any)

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| | |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | |
| | Amount Guaranteed Outstanding \$ |

| | | | | | |
|--------------------|--|--|-----------------------|---------------------------------|--|
| Date <u>/ /</u> | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| | | | | | |

List All Endorsers or Guarantors (if any)

| | |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | Amount Guaranteed Outstanding \$ |
| | |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation |
| | |
| | Amount Guaranteed Outstanding \$ |

SUBTOTAL OUTSTANDING LOANS THIS PAGE

\$ 575.⁶⁶

TOTAL OUTSTANDING LOANS

\$ 575.⁶⁶*****End of Report*****

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

FRIENDS OF TIM THOMAS

Street Address

3442 FINGER ROAD

City, State and Zip Code

GREEN BAY, WZ 54311



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

- ☐ January Continuing _____
 ☒ Pre-Primary *2018*
☐ Spring
 ☒ Fall
 ☐ Special
 ☐ Termination Report
 also complete Schedule 4
- ☐ July Continuing _____
 ☐ September Continuing _____
 ☐ Pre-Election _____

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

| | Column A This Period | Column B Calendar Year-To-Date |
|---|------------------------------|--------------------------------------|
| 1A. Contributions (Including Loans) from Individuals | \$ <i>1504</i> ⁹⁹ | \$ <i>5,007</i> ¹³ |
| 1B. Contributions from Committees (Transfers-In) | \$ <i>0</i> | \$ <i>0</i> |
| 1C. Other Income and Commercial Loans | \$ <i>0</i> | \$ <i>0</i> |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ <i>1504</i> ⁹⁹ | \$ <i>5,007</i> ¹³ |

2. DISBURSEMENTS

| | | |
|--|-------------------------------|-------------------------------|
| 2A. Gross Expenditures | \$ <i>2,720</i> ⁵⁷ | \$ <i>4,301</i> ⁸¹ |
| 2B. Contributions to Committees (Transfers-Out) | \$ <i>0</i> | \$ <i>0</i> |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ <i>2,720</i> ⁵⁷ | \$ <i>4,301</i> ⁸¹ |

CASH SUMMARY

| | |
|---|-------------------------------|
| Cash Balance Beginning of Report | \$ <i>1,920</i> ⁹⁰ |
| Total Receipts | \$ <i>1,504</i> ⁹⁹ |
| Subtotal | \$ <i>3,425</i> ⁸⁹ |
| Total Disbursements | \$ <i>2,720</i> ⁵⁷ |
| CASH BALANCE END OF REPORT | \$ <i>705</i> ³² |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ <i>0</i> |
| LOANS (Balance at the Close of This Period-3B) | \$ <i>0</i> |

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

| | | |
|--|-------------------------------------|------------------------------------|
| Type or Print Name of Candidate or Treasurer | Signature of Candidate or Treasurer | Date: |
| <i>TIMOTHY P. THOMAS</i> | <i>Timothy Thomas</i> | <i>7-30-18</i> |
| Email <i>ELECTTHOMAS@YAHOO.COM</i> | | Daytime Phone: <i>920-321-4532</i> |

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

RECEIPTS Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF TIM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Contributor | Occupation (if year-to-date total exceeds \$200) | Amount of Contribution | Y-T-D Total |
|----------|---|--|---------------------------|---------------------|
| 07/01/18 | TIMOTHY THOMAS 3442 FINGER RD GREEN BAY, WISCONSIN 54311 | DEPUTY SHERIFF | 25 ⁰⁰ | |
| 07/10/18 | MARK SKVARA 823 ONTONAGON CT GREEN BAY, WISCONSIN 54301 | ATTORNEY | 200 ⁰⁰ | 200 ⁰⁰ |
| 7/14/18 | RON SCHULTZ 2774 MANITOWOC RD GREEN BAY, WISCONSIN 54311 | | 50 ⁰⁰ | 50 ⁰⁰ |
| 7/14/18 | DOROTHY SHAUGHNESSY 325 ILLINOIS AVE GREEN BAY, WISCONSIN 54301 | | 100 ⁰⁰ | 100 ⁰⁰ |
| 7/15/18 | TIM THOMAS 3442 FINGER RD GREEN BAY, WISCONSIN 54311 | DEPUTY SHERIFF | 1,000 ⁰⁰ | |
| 7/18/18 | DAWN KAPLA 1604 ORZOLE ST GREEN BAY, WISCONSIN 54311 | | 100 ⁰⁰ | 100 ⁰⁰ |
| 7/01/08 | TIMOTHY THOMAS 3442 FINGER RD GREEN BAY, WISCONSIN 54311 | | 29 ⁹⁹ | 1,668 ⁷⁹ |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 1504⁹⁹

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1504⁹⁹

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$ 0

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 1504⁹⁹

SCHEDULE 1-C

RECEIPTS

Other Income and Commercial Loans

Page 1 of 1

Complete Committee Name

FRIENDS OF TOM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code of Source of Income | Type of Income | Amount |
|--|--|----------------|--------|
| | | | |
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| | | | |
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| | | | |
| | | | |
| SUBTOTAL OTHER INCOME THIS PAGE | | | \$ |
| TOTAL ITEMIZED OTHER INCOME | | | \$ |
| TOTAL OTHER INCOME | | | \$ |

SCHEDULE 2-A**DISBURSEMENTS**
Gross ExpendituresPage 1 of 1

Complete Committee Name

FRIENDS OF TOM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount |
|--|--|---------------------------------|--------|
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE | | | \$ |
| TOTAL ITEMIZED EXPENDITURES | | | \$ |
| TOTAL UNITEMIZED EXPENDITURES | | | \$ |
| TOTAL EXPENDITURES | | | \$ |

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

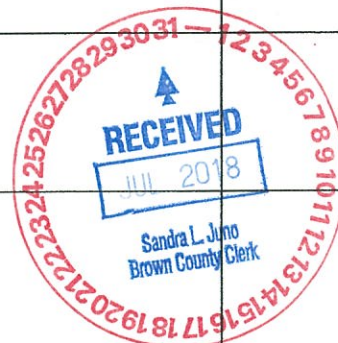
 Page 1 of 1

Complete Committee Name

FRIENDS OF TIM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount |
|---------|---|---------------------------------|---------------------|
| 7/01/18 | GO DADDY, COM LLC 14455 N. HAYDEN RD SUITE 219 SCOTTSDALE, AZ 85260 Check if: <input type="checkbox"/> In-Kind Offset | WEB SITE FEE | 25 ⁰⁵ |
| 7/16/18 | MY CAMPAIGN STORE LLC 304 WHITTINGTON PKWY #201 LOUISVILLE, KY 40222 Check if: <input type="checkbox"/> In-Kind Offset | CAMPAIGN VMS SIGNS | 2,348 ⁴³ |
| 7/21/18 | MY CAMPAIGN STORE LLC 304 WHITTINGTON PKWY #201 LOUISVILLE, KY 40222 Check if: <input type="checkbox"/> In-Kind Offset | CAMPAIGN HANG-OUT LITERATURE | 317 ¹⁰ |
| 7/22/18 | GO DADDY, COM LLC 14455 N. HAYDEN RD SUITE 219 SCOTTSDALE, AZ 85260 Check if: <input type="checkbox"/> In-Kind Offset | WEB SITE FEE | 29 ⁹⁹ |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |
| | Check if: <input type="checkbox"/> In-Kind Offset | | |



SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

 \$ 2,720⁵⁷

TOTAL ITEMIZED EXPENDITURES

 \$ 2,720⁵⁷

TOTAL UNITEMIZED EXPENDITURES

\$ 0

TOTAL EXPENDITURES

 \$ 2,720⁵⁷

SCHEDULE 2-B**DISBURSEMENTS**
Contributions To Committees
(Transfers-Out)Page 1 of 1

Complete Committee Name

FRIENDS OF TEM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date | Full Name, Mailing Address and Zip Code | Amount | Y-T-D Total |
|--|--|--------|-------------|
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | | |
| SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE | | \$ | |
| TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES | | \$ | |

SCHEDULE 3-A**Incurred Obligations Excluding Loans
ADDITIONAL DISCLOSURE**Page 1 of 1

Complete Committee Name

FRIENDS OF TIM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date / / | Full Name, Mailing Address and Zip Code of Creditor | Outstanding Balance Beginning This Period | New Obligations or Additions This Period | Cumulative Payments This Period | Outstanding Balance At Close of This Period |
|---|---|---|--|------------------------------------|---|
| / / | | Nature of Debt (Purpose) | | | |
| | | | | | |
| / / | | Nature of Debt (Purpose) | | | |
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| / / | | Nature of Debt (Purpose) | | | |
| | | | | | |
| SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE | | \$ | | | |
| TOTAL ITEMIZED OBLIGATIONS | | \$ | | | |
| TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS | | \$ | | | |
| TOTAL INCURRED OBLIGATIONS | | \$ | | | |

SCHEDULE 3-B**Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE**

Page ____ of ____

Complete Committee Name

FRIENDS OF TIM THOMAS

Instructions for completing schedules are on the back of each schedule.

| Date / / | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
|--|--|---|-----------------------|------------------------------------|---|
| List All Endorsers or Guarantors (if any) | | | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| List All Endorsers or Guarantors (if any) | | | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| List All Endorsers or Guarantors (if any) | | | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Date / / | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Obligations Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Obligations End of This Period |
| List All Endorsers or Guarantors (if any) | | | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| Full Name, Mailing Address and Zip Code of Guarantor | | Occupation | | | |
| | | Amount Guaranteed Outstanding \$ | | | |
| SUBTOTAL OUTSTANDING LOANS THIS PAGE | | | | | \$ |
| TOTAL OUTSTANDING LOANS | | | | | \$ |

*****End of Report*****



| | | |
|--|---|--|
| Campaign Finance Report Short Form ETHCF-2a | | Ethics ID Number |
| <input type="radio"/> Spring <input checked="" type="radio"/> Fall <input type="radio"/> Special | Pre-Primary <input checked="" type="checkbox"/> 2018 | <input type="radio"/> Continuing Report due Jan. 15, ____ |
| <input type="radio"/> Spring <input type="radio"/> Fall <input type="radio"/> Special | Pre-Election ____ | <input type="radio"/> Continuing Report due July 15, ____ |
| | | <input type="radio"/> Continuing Report due 4 th Tues Sept., ____ |
| <u>Friends of Vanderleest</u> | | |
| Name of Candidate or Committee (in full) | | |
| <u>1422 Beech Tree Drive, Green Bay, WI 54304</u> | | |
| Address | | |
| <u>920-737-0999</u> | | |
| Daytime Phone | | |

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.0103(3)(d), Stats.

| | | |
|---|---------------|--------------------------------|
| Signature of Committee Treasurer or Candidate | Date | Email Address |
| <u>John Vanderleest</u> | <u>8-6-18</u> | <u>Vanderleest@hotmail.com</u> |

ETHCF-2a | Rev 01/2016 | Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 |
Phone: 608-261-2028 | Fax: 608-264-9319 | Web: <https://cfis.wi.gov> | Email: GABCFIS@wi.gov

*****End of Report*****

**Short Form for use
"No Activity" Reporting**



| | |
|---|------------------|
| Campaign Finance Report Short Form ETHCF-2a | Ethics ID Number |
| <input type="radio"/> Spring <input checked="" type="radio"/> Fall <input type="radio"/> Special Pre-Primary <u>X 2018</u> <input type="radio"/> Continuing Report due Jan. 15, _____ | |
| <input type="radio"/> Spring <input type="radio"/> Fall <input type="radio"/> Special Pre-Election _____ <input type="radio"/> Continuing Report due July 15, _____ | |
| <input type="radio"/> Continuing Report due 4 th Tues Sept., _____ | |
| <u>Jacob Paplham</u> Name of Candidate or Committee (in full) | |
| <u>419 S Fisk St Green Bay 54303</u> Address | |
| <u>920-321-4522</u> Daytime Phone | |

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec 11.0103(3)(d), Stats.

| | | |
|---|--------------------|---|
| Signature of Committee Treasurer or Candidate <u>Jacob Paplham</u> | Date <u>8/6</u> | Email Address <u>jacob.paplham@gmail.com</u> |
|---|--------------------|---|

ETHCF-2a | Rev 01/2016 | Wisconsin Ethics Commission P.O. Box 7984, Madison, WI 53707-7984 |
Phone: (608) 266-8123 | Fax: 608-264-9319 | Web: <https://efis.wi.gov> | Email: GABCFIS@wi.gov

*****End of Report*****